

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		25	11-28-93
FORMALITY REVIEW			

# INDEX OF CLAIMS

Rejected N Non-elected  
 Allowed I Interference  
 (Through numeral) Canceled A Appeal  
 Restricted O Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
1	11/28/93
2	11/28/93
3	11/28/93
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50	11/28/93

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here